

DEC 20 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. .... 10/671,229  
Confirmation No. .... 8204  
Filing Date ..... September 24, 2003  
Inventor ..... Leonard Forbes  
Assignee ..... Micron Technology, Inc.  
Group Art Unit ..... 2814  
Examiner ..... P. Long  
Attorney's Docket No. .... MI22-2272  
Customer No. .... 021567  
Title: Dielectric Material Forming Methods and Enhanced Dielectric Methods

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Art Unit 2814  
Alexandria, VA 22313-1450

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3. Response to November 24, 2004 Office Action
4. Supplemental Information Disclosure Statement, PTO-1449, and cited reference

Dated: Dec. 20, 2004By: 

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PTO/SB/21 (08-03)

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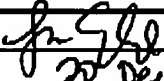
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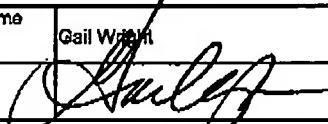
<b>TRANSMITTAL FORM</b>  <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/671,229
	Filing Date	September 24, 2003
	First Named Inventor	Leonard Forbes
	Art Unit	2814
	Examiner Name	P. Long
Total Number of Pages in This Submission	Attorney Docket Number	MI22-2272

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO-1449 and cited reference
Remarks Customer No. 021567 The Commissioner is hereby authorized to charge any additional fees required under 37 C.F.R. Section 1.16 and Section 1.17 and credit any overpayments to account no. 23-0925.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	James E. Lake Reg. No. 44,864; Wells St. John P.S. (021567)
Signature	
Date	20 Dec 2004

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Typed or printed name	Gail Wright
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Date	12/10/04

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**RESPONSE TO NOVEMBER 24, 2004 OFFICE ACTION**

To: MS Amendment  
Commissioner for Patents and Trademarks  
P.O. Box 1450  
Art Unit 2814  
Alexandria, VA 22313-1450

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**AMENDMENTS**